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Half of black gay men and a quarter of Latino gay men projected to be diagnosed within their lifetime

February 23, 2016 • 0 comments • By CDC NCHHSTP

Cross-posted from CDC's NCHHSTP Newsroom

If current HIV diagnoses rates persist, about 1 in 2 black men who have sex with men (MSM) and 1 in 4 Latino MSM in the United States will be diagnosed with HIV during their lifetime, according to a new analysis by researchers at the Centers for Disease Control and Prevention (CDC). The study, presented today at the Conference on Retroviruses and Opportunistic Infections in Boston, provides the first-ever comprehensive national estimates of the lifetime risk of an HIV diagnosis for several key populations at risk and in every state.

“As alarming as these lifetime risk estimates are, they are not a foregone conclusion. They are a call to action,” said Jonathan Mermin, M.D., director of CDC’s National Center for HIV/AIDS, Viral Hepatitis, STD, and Tuberculosis Prevention. “The prevention and care strategies we have at our disposal today provide a promising outlook for future reductions of HIV infections and disparities in the U.S., but hundreds of thousands of people will be diagnosed in their lifetime if we don’t scale up efforts now.”

CDC researchers used diagnoses and death rates from 2009-2013 to project the lifetime risk of HIV diagnosis in the United States by sex, race and ethnicity, state, and HIV risk group, assuming diagnoses rates remain constant. Overall, the lifetime risk of HIV diagnosis in the U.S. is now 1 in 99, an improvement from a previous analysis using 2004-2005 data that reported overall risk at 1 in 78.

However, this overall progress masks large disparities:

- Gay and bisexual men continue to be most affected by the HIV epidemic in

the U.S. At current rates, 1 in 6 MSM will be diagnosed with HIV in their lifetime, including 1 in 2 black MSM, 1 in 4 Latino MSM, and 1 in 11 white MSM.

- African Americans are by far the most affected racial or ethnic group with a lifetime HIV risk of 1 in 20 for men (compared to 1 in 132 for whites) and 1 in 48 for women (compared to 1 in 880 for whites).
- People who inject drugs are at much higher lifetime risk than the general population, and women who inject drugs have a higher risk than men (1 in 23 compared with 1 in 36).
- People living in the South are more likely to be diagnosed with HIV over the course of their lifetime than other Americans, with the highest risk in Washington, DC (1 in 13), Maryland (1 in 49), Georgia (1 in 51), Florida (1 in 54), and Louisiana (1 in 56).

Detailed findings, including data for all states and racial/ethnic and risk groups, are available in the Lifetime Risk of HIV Diagnosis in the United States Fact Sheet [PDF 189 KB].

“These estimates are a sobering reminder that gay and bisexual men face an unacceptably high risk for HIV – and of the urgent need for action,” said Eugene McCray, M.D., director of CDC’s Division of HIV/AIDS Prevention. “If we work to ensure that every American has access to the prevention tools we know work, we can avoid the outcomes projected in this study.”

CDC’s High Impact Prevention approach focuses on delivering the most effective prevention strategies – including HIV testing, ongoing care and treatment for people living with HIV, pre-exposure prophylaxis (PrEP, a daily anti-HIV pill for high-risk uninfected people) and condoms – to the populations that are most heavily affected by the epidemic. CDC devotes more HIV prevention resources to MSM, especially MSM of color, than to any other risk group. And since 2010, CDC has greatly increased HIV prevention funding to Southern health departments and community-based organizations, to reflect the burden of HIV in the region.

Resources:

- Fact Sheet [PDF 189 KB]
- Graphics

For more information on the new analysis and CDC's HIV prevention efforts, visit www.cdc.gov/nchhstp/newsroom.

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